

**BUSINESS LICENCE APPLICATION FOR:**

**TRANSIENT TRADER**

**PLEASE PRINT CLEARLY**

**PART 1**

No Charge - Charitable / non profit (with proof of status)

Type of Licence:     1-3 Days                       Monthly                       3 months                       Yearly

Type of Business:     Day Sales                                       Christmas Tree Sales

Door to Door / Sales Person

Operating Date(s): \_\_\_\_\_

Is your event selling food?                       Yes                                       No  
(If yes, Health Department Approval must be received by the Licensing  
Officer prior to issuance of Business Licence)

**PART 2 Applicant - This information will appear on your Business Licence**

Business Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

First Name

Last Name

Business Address: \_\_\_\_\_

# and Street

Apt/Unit #

City/Province

Postal Code

Email Address: \_\_\_\_\_

*(Note: Email will not appear on your licence)*

Business Phone #: \_\_\_\_\_

**PART 3 Event Location - This information may appear on your Business Licence**

Address: \_\_\_\_\_

Name of Facility / Business at above address: \_\_\_\_\_

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**WARNING:** You require a Municipal Business Licence to operate a business. Persons who operate a business without the required licence are liable to prosecution. Penalty of conviction may be to a maximum of \$25,000 exclusive of costs; and for a Corporation, to a maximum of \$50,000 exclusive of costs.

Personal information required by this form is collected under the authority of the Municipal Act and the City of Burlington Business Licensing **By-law 42-2008** and will be used for licensing purposes and for law enforcement purposes to ensure compliance with the bylaw. Questions regarding the collection of this information may be addressed to: Licence Clerk, Planning and Building Department, 426 Brant Street, P.O. Box 5013, Burlington, Ontario, L7R 3Z6. Telephone 905-335-7731.

Providing false or incomplete information could result in the refusal of this application or, if your licence has been issued, in a recommendation to the Licensing Committee that your licence be suspended or revoked.

I, (please print name) \_\_\_\_\_, acknowledge it is my responsibility to notify the City of Burlington in writing immediately of any change in the information provided during the course of the application, the period of a licence and upon any renewal of a licence and to ensure compliance with the City of Burlington Business Licensing **By-law 42-2008**, as amended, should a licence be issued.

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**OFFICE USE ONLY**

Fee: \_\_\_\_\_

Received Date: \_\_\_\_\_ Payment Information: \_\_\_\_\_

Accepted By: \_\_\_\_\_ Licence #: \_\_\_\_\_

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**Zoning Approval**

Zoning Designation:

Signature & Date:

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